ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	_(handwritten)_	32	7/27
FORMALITY REVIEW	A·S	943	9-14-_
RESPONSE FORMALITY REVIEW	MN	778	1/10/02

INDEX OF CLAIMS

✔	.... Rejected	N	.... Non-elected
=	.... Allowed	I	.... Interference
—	(Through numeral)... Canceled	A	.... Appeal
÷	.... Restricted	O	.... Objected

Claim Final	Original	Date								
		4/8/63	8/63							
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If more than 150 claims or 10 actions
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